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CONFIRMATION NO. 8860

Bib Data Sheet

SERIAL NUMBER 10/068,313	FILING DATE 02/06/2002 RULE	CLASS 709	GROUP ART UNIT 2152	ATTORNEY DOCKET NO. 01-2122.02
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 03/01/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	AL	6	26	3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS  
021491 24504

**TITLE**

System and method for managing elements of a communication network

FILING FEE RECEIVED 848	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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